

HYBRID EMPLOYEE AGREEMENT

Name of hybrid employee: _____

Name of employee supervisor: _____

The hybrid employee agrees to work at the following off-site location: _____

Note which days of the week the hybrid employee will telework: _____

Note which days of the week the hybrid employee will be at the employer worksite: _____

List the types of assignments the hybrid employee will work on when teleworking: _____

List the equipment the employer owns that the hybrid employee will use from the telework location. **Note:** *All employer-owned equipment and supplies must be returned to the employer when the telework/hybrid arrangement ends.* _____

The hybrid employee agrees to check communications via email, telephone, text, instant message etc. at least _____ times per day.

The hybrid employee agrees to keep cohorts and their supervisor apprised of progress on their projects.

The hybrid employee must complete and submit the *Home Office Safety & Ergonomic Guidelines* document with this agreement.



Additional conditions agreed upon by the supervisor and hybrid employee are as follows:

SIGNATURES

We have reviewed the *Hybrid Employee Agreement*. We have read and understand this agreement and accept its conditions.

If at anytime the employer is not satisfied with the hybrid employee's productivity or level of communication, the employer can terminate the hybrid work arrangement. And if at anytime the hybrid employee is not satisfied with the hybrid work arrangement, the employee may return to the worksite full time.

Supervisor name: _____

Supervisor signature: _____

Date: _____

Hybrid employee name: _____

Hybrid employee signature: _____

Date: _____



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